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Bib Data Sheet

CONFIRMATION NO. 2485

SERIAL NUMBER 10/730,423	FILING OR 371(c) DATE 12/08/2003 RULE	CLASS 623	GROUP ART UNIT 3733	ATTORNEY DOCKET NO. 1671-0279	
APPLICANTS Janine M. Orban, Warsaw, IN; Herbert E. Schwartz, Fort Wayne, IN; Nathaniel W. Grobe, Warsaw, IN;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/09/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY IN	SHEETS DRAWING 11	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 3
ADDRESS 27777					
TITLE IMPLANT DEVICE FOR CARTILAGE REGENERATION IN LOAD BEARING ARTICULATION REGIONS					
FILING FEE RECEIVED 1160	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		